

Name:_

SUPERIOR COURT OF CALIFORNIA, COUNTY OF MONTEREY EMPLOYMENT APPLICATION

Human Resources Department 240 Church St., Suite 318 Salinas, CA 93901 (831) 775-3007

completed app Type or print The informati	olication. in ink.	cation will be used to verify and evalue.		will not be accepted in place of a alifications. An incomplete application
ast Name		First Name		Middle Name
revious Names: Li	st any previous names unde	r which you have worked, gone to s	chool or served in	the Armed Services
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_ Relationship:_

Department:_

	_ Issued by:	Expiration Date:	Number:
7. EDUCATION: High School Diploma:	() YES () NO	() G.E.D. CERTIFIC	ATE
NAME AND LOCATION OF COLLEGES OR SCHOOLS ATTENDED:	COURSE OF STUDY MAJOR		EGREES, FIFICATES, UNITS
EXPERIENCE - Please account for all en NECESSARY, PLEASE USE ADDITIONAL	L WORK EXPERIENCE ADI	DENDUM FORM. In addition	n, please indicate any other experience
that you think is relevant to the position for w ACCEPTABLE AS A REPLACEMENT FOR			
Name of Employer:	Employer Address:	to an requested information ful	·)·
Dates Employed From: To:	Position Title:		
Hours Monthly	Description of Duties:		
per week: salary: Reason for Leaving:			
Number of persons you supervised:			
Name of Supervisor:			
Phone: ()			
May we contact this employer?) NO		
Name of Employer:	Employer Address:		
Dates Employed From: To:	Position Title:		
From: To: Hours Monthly	Description of Duties:		
per week: salary:			
Reason for Leaving:			
Number of persons you supervised:			
Number of persons you supervised: Name of Supervisor:			
Name of Supervisor: Phone: () May we contact this employer?) NO		
Name of Supervisor: Phone: () May we contact this employer?	Salinas () Monterey (Act of 1986, employment of person ity and authorization for employment of my work and personal history and firms named therein, except my oge in providing this information. Mest of my knowledge. I understand	Sking City () Marina Is hired by the Superior Court with the United States. Indicate the United States of the United States of the United States. Indicate the United States of the United States	Il be contingent upon presentation by the plication, on related papers, and in provide any information requested about the rmation on this application and

WORK EXPERIENCE ADDENDUM

Name of Employer:		Employer Address:
Dates Employed From:	То:	Position Title:
Hours per week:	Monthly salary:	Description of Duties:
Reason for Leaving:		
Number of persons you su	upervised:	
Name of Supervisor:		
Phone: ()		
May we contact this empl	oyer?	
Name of Employer:		Employer Address:
Dates Employed From:	То:	Position Title:
Hours per week:	Monthly salary:	Description of Duties:
Reason for Leaving:		
Number of persons you su	pervised:	
Name of Supervisor:		
Phone: ()		
May we contact this empl	oyer? () YES () NO	
Name of Employer:		Employer Address:
Dates Employed From:	To:	Position Title:
Hours per week:	Monthly salary:	Description of Duties:
Reason for Leaving:		
Number of persons you su	pervised:	
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May we contact this empl	loyer?	
Name of Employer:		Employer Address:
Dates Employed From:	То:	Position Title:
Hours per week:	Monthly salary:	Description of Duties:
Reason for Leaving:		
Number of persons you su	apervised:	
Name of Supervisor:		
Phone: ()		
May we contact this empl	oyer?	

SUPERIOR COURT OF CALIFORNIA, COUNTY OF MONTEREY

EQUAL OPPORTUNITY EMPLOYER QUESTIONNAIRE

Your voluntary answers to this section will provide statistics needed for the Monterey County Superior Court to evaluate its recruitment program as well as prepare statistical reports required by Federal and State agencies. This form will be detached from the employment application. The information contained on this form will be confidential and will NOT be used to make a decision about your employment.

P(OSITION APPLIED FOR:
() FEMALE () MALE
E	THNIC GROUP - PLEASE CHECK ONE WHICH BEST IDENTIFIES YOU:
() WHITE (not of Hispanic origin): All persons not classified into one of five specific ethnic categories that follow.
() ASIAN or PACIFIC ISLANDER (other than Filipinos): All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Pacific Islands.
() BLACK (not of Hispanic origin): All persons having origin in any of the black racial groups.
() FILIPINO: All persons having origins in the peoples of the Philippine Islands.
() HISPANIC: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
() AMERICAN INDIAN or ALASKAN NATIVE: All persons having origins in any of the original peoples of North America.
- Н	OW DID YOU FIND OUT ABOUT THIS JOB? (CHECK ONE OR MORE)
() SALINAS CALIFORNIAN
() MONTEREY HERALD
() RUSTLER
() NEWSPAPER OTHER THAN ONE OF THE THREE LISTED ABOVE:
() COURT OR COUNTY EMPLOYEE () FRIEND OR RELATIVE
() POSTING AT COURTHOUSE
() OTHER: